							•			-
14		CLAIMS A	S FILED Column 1)		umn 2)	SMALL	ENTITY	OR	OTHER	R THAN
OR		NUMB	ER FILED	NUMBER	EXTRA	RATE	FEE	7	RATE	FEE
ASIC F	EE						380.00	OR		760.00
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DEPEN	IDENT C	LAIMS	2 minus	33= *				OR		18C
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i me a				ero, enter "0" in	column 2	TOTAL		OR	·TOTAL	940
	C	(Column 1)	AMENDE		10.1	CMALL	ENTITY	00	OTHER	
		CLAIMS	1	(Column 2) HIGHEST	(Column 3)	SHALL		OR	SMALL	
		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI: TIONAL : FEE
Total		.34	Minus	-30		X\$ 9=		OR	X\$18=	. ,
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FIRS	TPRESE	ENTATION OF M	ULTIPLE DE	PENDENT CLAIN	1	1 200		OR	X/62	,
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		(Column 1)		(Column 2)	(Column 3)	ADDIT. FEE	<u></u>	•	ADDII. FEE	-
		(Column 1) CLAIMS		(Column 2)	(Column 3)	ADDII. FEE	400		ADDII. FEE	
		CLAIMS REMAINING		HIGHEST NUMBER	PRESENT		ADDI-			ADDI-
		CLAIMS		HIGHEST NUMBER PREVIOUSLY		RATE	TIONAL		RATE	ADDI- TIONAL
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	endent	CLAIMS REMAINING AFTER AMENDMENT	Minus Minus	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE X\$ 9=	TIONAL	OR	RATE X\$18=	ADDI- TIONAL
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indep		CLAIMS REMAINING AFTER AMENDMENT * * * * * * * * * * * * * * * * * *	Minus ULTIPLE DE	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	X\$ 9= X39= +130=	TIONAL	OR OR OR	X\$18= X78= +260=	ADDI- TIONAL
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Application or Docket Number

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